

City Clerk

ATTN: CLAIMS

200 E. Wells St. Room 205

Milwaukee, WI 53202-3567

In support of filing a claim against the City of Milwaukee, the following is submitted as evidence of a sewer cover in disrepair causing severe damage to a truck leased and operated by Laketown Moving, Inc. dba College Hunks Hauling Junk and Moving.

On Friday, March 11, 2022, the College Hunks junk truck was travelling eastbound on Howard Ave. east of Whitnall Ave. at 12:20pm to a job in St. Francis. The passenger rear tires ran over the dislodged sewer cover and caused the truck to turn sharply to the left and come to rest on the grass median. The truck was partially hanging into oncoming west bound traffic. No injuries or other property was damaged other than the truck.

Sherriff's deputy happened to come upon the scene and blocked oncoming traffic until a local police officer arrived and relieved the sheriff's deputy. The truck was towed to Badger Truck on 10915 West Rogers.

Repairs were made and the truck resumed operations on March 30, 2022. While the truck was out of service, a replacement truck was rented at Penske to continue business operations.

Badger Truck	\$8002.72
Tow	\$354.48
Penske	\$2761.80
Total	\$11,119.00

Laketown Moving, Inc. is seeking relief in the amount of \$11,119.00

Matthew J. Gunderson

Owner/Operator
Laketown Moving, Inc. dba College Hunks Hauling Junk & Moving
414-366-9188
Matt.Gunderson@chhj.com
5656 South Packard Ave. #22
Cudahy, WI 53110

OFFICE OF CITY ATTORNEY
18 APR 22 AM 08:24

CITY OF MILWAUKEE
2022 APR 14 PM 3:30
CITY CLERK'S OFFICE







COLLEGE HUNKS
HAULING JUNK

www.CollegeHunks.com
262-218-4302

**STRESS-FREE
JUNK REMOVAL**

Commercial & Residential

Franchise Opportunities
Available

FEATURED ON
THE PRICE IS RIGHT

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262-218-4302

COLLEGE HUNKS.



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Honest Uniformed Nice Knowledgeable Service

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HUNKS.
HAULING JUNK
& MORE
COLLEGEHUNKS.COM

CUSTOMER #: 4143669188

988328



LAKETOWN MOVING
MATT GUNDERSON
5656 S PACKARD
CUDAHY, WI 53110
HOME:414-366-9188 CONT:414-366-9188
BUS: CELL:

INVOICE

DUPLICATE 3
PAGE 1

Badger Isuzu Truck Center
10915 W Rogers Street
West Allis, WI 53227
414-321-3100 • www.BadgerTruck.com

SERVICE ADVISOR: 1540 DOUG BUHROW

Table with columns: COLOR, YEAR, MAKE/MODEL, VIN, LICENSE, MILEAGE IN/ OUT, TAG, DEL DATE, PROD. DATE, WARR. EXP., PROMISED, PO NO., RATE, PAYMENT, INV. DATE

Table with columns: R.O. OPENED, READY, OPTIONS

Table with columns: LINE, OPCODE, TECH, TYPE, HOURS, LIST, NET, TOTAL

A TOWED IN - INSTALL DRIVE SHAFT REMOVED DURING TOWING
TOW TOWING

1540CPIHT 0.00 LABOR: 0.00 OTHER: 0.00 TOTAL LINE A: 0.00

B CUSTOMER REPORTS DRIVER RAN SOMETHING OVER AND DAMAGE TO REAR END -
PERFORM INSPECTION AND REPORT FINDINGS

1 DIAG DAMAGE TO REAR END
4866CPIHT 225.00 225.00

PARTS: 0.00 LABOR: 225.00 OTHER: 0.00 TOTAL LINE B: 225.00

C APPROVED- PERFORM 70 POINT "A" SERVICE - GAS ENGINE (SEMI-SYNTHETIC OIL), RECOMMENDED SERVICE INTERVALS EVERY 7,500 MILES

IAPMG PERFORM 70 POINT "A" SERVICE - GAS ENGINE (SEMI-SYNTHETIC OIL), RECOMMENDED SERVICE INTERVALS EVERY 7,500 MILES

1540CPMWA 149.95 149.95
6679CPMWA 11.20 11.20

IGREAS HI-TEMPERATURE LITHIUM GREASE 11.20 11.20
I5W20S FULL SYNTHETIC MOTOR OIL, LIGHT DUTY TRUCK OR CAR 31.56 31.56

IWWG WINDSHIELD WASHER FLUID 3.00 3.00
1 2-94561-109-0 FILTER; OIL 2.02 2.02

PARTS: 3.41 LABOR: 149.95 OTHER: 47.78 TOTAL LINE C: 201.14

17749 COMPLETED OIL CHANGE AND INSPECTION, 6679

D** APPROVED - REPLACE TWO TIRES 19.5IN, DRIVES (TY303 ITIRE2H REPLACE TWO TIRES 19.5IN OR 22.5IN (SEE SERVICE ADVISOR FOR TIRE TYPE AND TIRE POSITION)

1540CPIHT

HOURS OF OPERATION:

MONDAY - FRIDAY
7:00AM - 8:00 PM
SATURDAY & SUNDAY
CLOSED

THANK YOU!

Table with columns: STATEMENT OF DISCLAIMER, DESCRIPTION, TOTALS, CUSTOMER SIGNATURE, PLEASE PAY THIS AMOUNT

Motor vehicle repair practices are regulated by chapter ATCP 132, Wis. Adm. Code, administered by the Bureau of Consumer Protection, Wisconsin Dept. of Agriculture, Trade and Consumer Protection, P.O. Box 8911, Madison, Wisconsin 53708-8911.

CUSTOMER #: 4143669188

988328



LAKETOWN MOVING
MATT GUNDERSON
5656 S PACKARD
CUDAHY, WI 53110
HOME:414-366-9188 CONT:414-366-9188
BUS: CELL:

INVOICE

DUPLICATE 3
PAGE 2

Badger Isuzu Truck Center
10915 W Rogers Street
West Allis, WI 53227
414-321-3100 • www.BadgerTruck.com

SERVICE ADVISOR: 1540 DOUG BUHROW

Table with columns: COLOR, YEAR, MAKE/MODEL, VIN, LICENSE, MILEAGE IN/ OUT, TAG, DEL DATE, PROD. DATE, WARR. EXP., PROMISED, PO NO., RATE, PAYMENT, INV. DATE. Includes details for ISUZU NPR and service dates.

Table with columns: LINE OPCODE, TECH, TYPE, HOURS, LIST, NET, TOTAL. Includes line 6679CPIHT and a summary of parts and labor.

E** APPROVED - REMOVE INSPECT AND REPLACE DRIVE AXLE SPRING, U BOLTS
1 SPRING ASSEMBLY/SHOCKS/SHACKLES ETC

Table with columns: LINE OPCODE, TECH, TYPE, HOURS, LIST, NET, TOTAL. Lists various parts and labor for the drive axle assembly.

F** APPROVED - REMOVE AND INSPECT AND REPLACE REAR SHOES AND DRUMS
IRBJ PERFORM REAR BRAKE REPLACEMENT (SHOES AND

HOURS OF OPERATION:
MONDAY - FRIDAY
7:00AM - 8:00 PM
SATURDAY & SUNDAY
CLOSED

THANK YOU!

Table with columns: STATEMENT OF DISCLAIMER, DESCRIPTION, TOTALS. Includes a disclaimer and a summary of charges.

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CUSTOMER #: 4143669188

988328



LAKETOWN MOVING
MATT GUNDERSON
5656 S PACKARD
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DUPLICATE 3
PAGE 3

Badger Isuzu Truck Center
10915 W Rogers Street
West Allis, WI 53227
414-321-3100 • www.BadgerTruck.com

SERVICE ADVISOR: 1540 DOUG BUHROW

COLOR	YEAR	MAKE/MODEL	VIN	LICENSE	MILEAGE IN/ OUT	TAC	
	20	ISUZU NPR	54DC4W1B7LS804997		17749/17749	T921	
DEL DATE	PROD. DATE	WARR. EXP.	PROMISED	PO NO.	RATE	PAYMENT	INV. DATE
23FEB21 DD			18:00 14APR22		0.00	CASH	29MAR22

R.O. OPENED	READY	OPTIONS:				
15:52 14MAR22	13:04 29MAR22					
LINE OPCODE	TECH	TYPE	HOURS	LIST	NET	TOTAL

DRUMS)
1540CPIHT 750.00 750.00
PARTS: 0.00 LABOR: 750.00 OTHER: 0.00 TOTAL LINE F: 750.00

G** APPROVED - REMOVE INSPECT AND REINSTALL REAR DIFFERENTIAL

1 DIFFERENTIAL

1540CPIHT
6679CPIHT

450.00 450.00
PARTS: 0.00 LABOR: 450.00 OTHER: 0.00 TOTAL LINE G: 450.00
17749

BROUGHT TRUCK IN PUT ON JACK STANDS. UNBOLTED REAR WHEELS AND AXLE. UNBOLTED DRIVESHAFT, REAR SHOCKS, REAR BRAKE LINES, AND REAR ABS SENSORS. UNBOLTED ALL 4 LEAF SPRING SHACKLES. LOWERED REAR END TO GROUND, ROLLED REAR END OUT FROM TRUCK. PUT REAR END ON JACK STANDS. UNBOLTED U-BOLTS FOR LEAF SPRING AND REMOVED OLD SPRING. REMOVED CRUSHED BRAKE LINE AND HOSE. UNBOLTED BRAKE DRUMS. UNBOLTED SPRING PURCHASE AND STOP BLOCKS. INSPECTED ALL REAR END COMPONENTS AND REAR BRAKE.
BOLTED NEW SPRING PURCHASE AND STOP BLOCKS. PUT NEW BRAKE LINE AND HOSE ON AXLE. BOLTED DRUMS BACK ON AND BOLTED AXLES BACK IN. BOLTED NEW LEAF SPRINGS ON AXLE WITH NEW U-BOLTS. ROLLED REAR END BACK IN TRUCK. BOLTED LEAF SPRINGS TO TRUCK WITH NEW SHACKLES AND BOLTS. BOLTED BRAKE LINES, ABS SENSORS, DRIVESHAFT, AND NEW SHOCKS TO REAR END. ADJUSTED REAR BRAKES AND FILLED REAR DIFF WITH OIL. BOLTED WHEELS ON AND LOWERED REAR END. TOOK ON A TEST DRIVE. COME BACK. CHECKED DIFF OIL AND BRAKE ADJUSTMENT. 6679

H** APPROVED - REMOVE FUEL TANK SPLASH GUARD INSPECT AND REPLACE

1 SPLASH GUARD

1540CPIHT

75.00 75.00
PARTS: 0.00 LABOR: 75.00 OTHER: 0.00 TOTAL LINE H: 75.00

I** APPROVED - REMOVE INSPECT AND REPLACE REAR SHOCKS

HOURS OF OPERATION:

MONDAY - FRIDAY
7:00AM - 8:00 PM
SATURDAY & SUNDAY
CLOSED

THANK YOU!

STATEMENT OF DISCLAIMER

The factory warranty constitutes all of the warranties with respect to the sale of this item/items. The Seller hereby expressly disclaims all warranties, either express or implied, including any implied warranty of merchantability or fitness for a particular purpose. Seller neither assumes nor authorizes any other person to assume for it any liability in connection with the sale of this item/items.

DESCRIPTION	TOTALS
LABOR AMOUNT	
PARTS AMOUNT	
GAS, OIL, LUBE	
SUBLET AMOUNT	
MISC. CHARGES	
TOTAL CHARGES	
LESS INSURANCE	
SALES TAX	
CUSTOMER SIGNATURE	PLEASE PAY THIS AMOUNT

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CUSTOMER #: 4143669188

988328



LAKETOWN MOVING
MATT GUNDERSON
5656 S PACKARD
CUDAHY, WI 53110
HOME: 414-366-9188 CONT: 414-366-9188

INVOICE
DUPLICATE 3
PAGE 4

Badger Isuzu Truck Center
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West Allis, WI 53227
414-321-3100 • www.BadgerTruck.com

BUS:		CELL:		SERVICE ADVISOR: 1540 DOUG BUHROW			
COLOR	YEAR	MAKE/MODEL	VIN	LICENSE	MILEAGE IN/ OUT	TAG	
	20	ISUZU NPR	54DC4W1B7LS804997		17749/17749	T921	
DEL DATE	PROD. DATE	WARR. EXP.	PROMISED	PO NO.	RATE	PAYMENT	INV. DATE
23FEB21 DD			18:00 14APR22		0.00	CASH	29MAR22
R.O. OPENED	READY	OPTIONS:					
15:52 14MAR22	13:04 29MAR22						

LINE	OPCODE	TECH	TYPE	HOURS	LIST	NET	TOTAL
1		REAR SHOCKS					
		1540CPIHT				150.00	150.00
2		2-9406X-008-0 FV ABSORBER ASM			58.82	49.41	98.82
PARTS:		98.82	LABOR:	150.00	OTHER:	0.00	TOTAL LINE I: 248.82

J** APPROVED - REMOVE INSPECT AND REPLACE HUBS							
		1 HUBS					
		1540CPIHT				450.00	450.00
PARTS:		0.00	LABOR:	450.00	OTHER:	0.00	TOTAL LINE J: 450.00

CUSTOMER PAY SHOP SUPPLIES FOR REPAIR ORDER							150.00

VISIT OUR WEBSITE
FOR
PARTS AND SERVICE SPECIALS
WWW.BADGERTRUCK.COM

RETORQUE U-BOLTS AFTER 500 miles.

[Signature]
Service manager

HOURS OF OPERATION:

MONDAY - FRIDAY
7:00AM - 8:00 PM
SATURDAY & SUNDAY
CLOSED

THANK YOU!

STATEMENT OF DISCLAIMER The factory warranty constitutes all of the warranties with respect to the sale of this item/items. The Seller hereby expressly disclaims all warranties either express or implied, including any implied warranty of merchantability or fitness for a particular purpose. Seller neither assumes nor authorizes any other person to assume for it any liability in connection with the sale of this item/items.	DESCRIPTION	TOTALS
	LABOR AMOUNT	3239.95
	PARTS AMOUNT	4137.73
	GAS, OIL, LUBE	44.78
	SUBLET AMOUNT	0.00
	MISC. CHARGES	182.00
	TOTAL CHARGES	7604.46
	LESS INSURANCE	0.00
	SALES TAX	418.26
	CUSTOMER SIGNATURE	PLEASE PAY THIS AMOUNT

Motor vehicle repair practices are regulated by chapter ATCP 132, Wis. Adm. Code, administered by the Bureau of Consumer Protection, Wisconsin Dept. of Agriculture, Trade and Consumer Protection, P.O. Box 8911, Madison, Wisconsin 53708-8911.

Ray's Towing Inc.

833 W. Waterford Ave.
 Milwaukee, WI 53221
 Phone: 414-481-4600
 Fax: 414-481-1242

Invoice

DATE	INVOICE #
03/11/2022	131565

Bill To

CREDIT CARD-RAYS 1 1, WI 1

SERVICE DATE	P.O. NUMBER	REF #	TERMS	TRUCK #	TRAILER #
03/11/2022					
QUANTITY	DESCRIPTION			PRICE EACH	AMOUNT
1	Heavy Duty Towing Charge			\$336.00	\$336.00
PAYMENT DATE	PAYMENT DESCRIPTION				PAYMENT AMT
CALL DETAILS:				Sub Total (\$):	336.00
LOC: 327 E. Howard Ave.,Milwaukee,WI				Tax (\$):	18.48
DES: 5656 S. Packard Ave.,Milwaukee,WI,Packard Plaza				Total (\$):	354.48
2020 Isuzu NPR White					
EC69707				Payments (\$):	0.00
ODO: 17,749				Total Due (\$):	354.48
VIN#: 54DC4W1B7LS804997					
NOTES:					

Rental Agreement Cover Sheet



24/7 Roadside Assistance:
1-800-526-0798

Rental Agreement #:83889659

COMMERCIAL LOCAL

Created by:	M.HUFFMAN	Pick Up Date:	03/11/22 03:27 PM
Completed by:	K.TOMKALSKI	Expected Drop-Off:	03/18/22 03:27 PM
Entered At:	5675-10	Actual Drop-Off:	03/18/22 03:27 PM
Status:	REWRITTEN	End Bill Date:	03/18/22 03:27 PM
Customer Name:	LAKETOWN MOVING, INC.	Batch:	5669 on 03/18/22
Created On:	03/11/22 09:12 PM	Changed On:	03/18/22 01:40 PM

BILLING INFORMATION

Invoice #: PO #: Matt Gunderson-Cudah Billing Cycle: Weekly
 Bill Start Date:03/11/22 03:27 PM Next Billing: 03/18/22

Remit To: PENSKE TRUCK LEASING CO.,L.P. - PO BOX 802577 CHICAGO, IL 60680-2577 USA

REWRITE INFORMATION

Original: 83889659 (1) Original Date Out: 03/11/22 03:27 PM
 Original Expected Return: 03/18/22 Previous: Current: 83889659 (1)

CHARGES

Type	Quantity	Unit of Meas	Rate	Charge
Unit #:487608	1	Week	\$375.00	\$375.00
Mileage Out: 8,631 In: 9,281	650	Miles	\$0.1900	\$123.50
Ldw \$1000 Responsibility	1	Week	\$280.00	\$280.00
Liability Accident Insurance	1	Week	\$175.00	\$175.00
<u>SUBTOTAL:</u>				\$953.50
<u>TAXES</u>				
WI SALES TAX				\$27.42
<u>TOTAL DUE:</u>				\$980.92

PAYMENTS AND REFUNDS

Pay Type	Trans	Date	Card #	Approval Code	
VI	PYMT	03/18/2022	xxxxxxxxxxxx6494	511141 on 03/11/2022	(\$980.92)
<u>PAYMENT:</u>					(\$980.92)
<u>NET DUE:</u>					\$0.00

Penske respects your privacy. Penske collects contact, driver's license, and payment information from Customers at time of rental, and shares this information with service providers as needed to facilitate the rental process, perform watch list checks, and process payments. You may have a right to request copies or deletion of the personal information we collect about you under certain local privacy laws. For details on how Penske and its trusted partners manage your personal information, provide you with choices regarding your personal information, and a statement of your privacy rights, see our full Privacy Policy at www.gopenske.com/privacy. You may also contact us at privacy@penske.com or (844) 967-0109.

Customer acknowledges that Customer has read, or been given an opportunity to read, the Rental Agreement, including this Cover Sheet, General Terms and Conditions, as well as any attachments hereto and agrees to be fully bound by its terms. Before deciding whether to purchase the optional limited damage waiver, you may wish to determine whether your own automobile insurance already affords you coverage for damage to the rental vehicle. To the extent the Customer had purchased Limited Damage Waiver coverage, Customer acknowledges reading and understanding, and agreeing with the disclosures, exclusions, and terms and conditions applicable to Limited Damage Waiver as set forth in Attachment D to the Rental Agreement.

By: _____
 Customer/Authorized Signatory

Rental Agreement Cover Sheet



24/7 Roadside Assistance:
1-800-526-0798

Rental Agreement #: 83889659

Created by: M.HUFFMAN
Completed by: K.TOMKALSKI
Entered At: 5675-10
Status: REWRITTEN

COMMERCIAL LOCAL

Pick Up Date: 03/11/22 03:27 PM
Expected Drop-Off: 03/18/22 03:27 PM
Actual Drop-Off: 03/18/22 03:27 PM
End Bill Date: 03/18/22 03:27 PM
Batch: 5669 on 03/18/22

CUSTOMER INFORMATION

Acct: 3AL1Z100 - 5675
LAKETOWN MOVING, INC.
5656 S PACKARD AVE
STE 22
CUDAHY, WI 53110-2658 USA
Day (414) 366-9188
NRA #: 3372

PICK UP/DROP OFF LOCATION

PENSKE SOUTH MILWAUKEE (5675-10)
6719 S 13TH ST
MILWAUKEE, WI 53221 USA
Voice (414) 768-8600
Fax (414) 768-0200

DRIVER NAME(S): MATTHEW GUNDERSON

This lessor cooperates with all Federal, State, and local law enforcement officials nationwide to provide the identity of customers who operate this rental CMV

TRAVEL SCOPE: Interstate

UNIT INFORMATION

Unit #: 487608
2016 - 16FT SAG LIGHT VAN
License #: 3171658
License State: IN
License Exp: 06/30/2022
Owning Location: 5675-10

Max. Payload: 5,373 lbs.
Height: 10 ft.6 in.

Rented With Damage: NO
Returned With Damage: NO
Mileage Out: 8,631

Mileage In: 9,281

Unleaded Fuel Out: FULL

Unleaded Fuel In: FULL

Vehicle Year: 2021

Vehicle Make: ISUZU TRUCK

VIN: 54DC4W1D9MS201732

Customer shall be responsible for all tolls incurred in the operation of the Vehicle, whether or not the provided transponder is used.

NO HAZARDOUS MATERIAL BEING TRANSPORTED

OPTIONAL PROTECTION PLANS

Limited Damage Waiver/LDW \$1000 Responsibility	*ACCEPTED*
Rates: \$1,213.33/Month \$280.00/Week	\$40.00/Day
Limited Damage Waiver/LDW \$2,000 Responsibility	*DECLINED*
Limited Damage Waiver/LDW \$5000 Responsibility	*DECLINED*
Liability Coverage/LIABILITY ACCIDENT INSURANCE	*PENSKE PROVIDES*
Rates: \$758.33/Month \$175.00/Week	\$25.00/Day
Supplemental Liability	*DECLINED*

THIS CONTRACT OFFERS, FOR ADDITIONAL CHARGE OPTIONAL VEHICLE PROTECTION TO COVER YOUR FINANCIAL RESPONSIBILITY FOR DAMAGE OR LOSS TO THE RENTAL VEHICLE. THE PURCHASE OF OPTIONAL VEHICLE PROTECTION IS OPTIONAL AND MAY BE DECLINED. YOU ARE ADVISED TO CAREFULLY CONSIDER WHETHER TO PURCHASE THE PROTECTION IF YOU HAVE A RENTAL VEHICLE COLLISION COVERAGE PROVIDED BY YOUR CREDIT CARD OR AUTOMOBILE INSURANCE POLICY. BEFORE DECIDING WHETHER TO PURCHASE OPTIONAL VEHICLE PROTECTION, YOU MAY WISH TO DETERMINE WHETHER YOUR CREDIT CARD OR VEHICLE INSURANCE AFFORDS YOU COVERAGE FOR DAMAGE TO THE RENTAL VEHICLE AND THE AMOUNT OF DEDUCTIBLE UNDER SUCH COVERAGE.

Rental Agreement Cover Sheet



24/7 Roadside Assistance:
1-800-526-0798

Rental Agreement #:83968028

COMMERCIAL LOCAL

Created by:	K.TOMKALSKI	Pick Up Date:	03/18/22 03:27 PM
Completed by:	K.SUDHEER	Expected Drop-Off:	03/25/22 03:27 PM
Entered At:	5675-10	Actual Drop-Off:	03/23/22 12:04 PM
Status:	COMPLETED	End Bill Date:	03/23/22 12:04 PM
Customer Name:	LAKETOWN MOVING, INC.	Batch:	5674 on 03/23/22
Created On:	03/18/22 01:40 PM	Changed On:	03/23/22 05:05 PM

BILLING INFORMATION

Invoice #: PO #: Matt Gunderson-Cudah Billing Cycle: Weekly
Bill Start Date:03/18/22 03:27 PM

Remit To: PENSKE TRUCK LEASING CO.,L.P. - PO BOX 802577 CHICAGO, IL 60680-2577 USA

REWRITE INFORMATION

Original: 83889659 (1) Original Date Out: 03/11/22 03:27 PM
Original Expected Return: 03/18/22 Previous: 83889659 (1) Current: 83968028 (2)

CHARGES

Type	Quantity	Unit of Meas	Rate	Charge
Unit #:487608				
	1	Week	\$375.00	\$375.00
Mileage Out: 9,281 In: 9,187	-94	Miles	\$0.1900	-\$17.86
Ldw \$1000 Responsibility	5	Day	\$40.00	\$200.00
Liability Accident Insurance	5	Day	\$25.00	\$125.00
Unleaded Gasoline	18.7	Gallons	\$5.25	\$98.17
SUBTOTAL:				\$780.31

TAXES

WI SALES TAX \$19.65
TOTAL DUE: \$799.96

PAYMENTS AND REFUNDS

Pay Type	Trans	Date	Card #	Approval Code	
VI	PYMT	03/23/2022	xxxxxxxxxxxx6494	808104 on 03/18/2022	(\$799.96)
PAYMENT:					(\$799.96)
NET DUE:					\$0.00

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Customer acknowledges that Customer has read, or been given an opportunity to read, the Rental Agreement, including this Cover Sheet, the General Terms and Conditions, as well as any attachments hereto and agrees to be fully bound by its terms. Before deciding whether to purchase the optional limited damage waiver, you may wish to determine whether your own automobile insurance already affords you coverage for damage to the rental vehicle. To the extent the Customer had purchased Limited Damage Waiver coverage, Customer acknowledges reading, understanding, and agreeing with the disclosures, exclusions, and terms and conditions applicable to Limited Damage Waiver as set forth in Attachment D to the Rental Agreement.

By: _____
Customer/Authorized Signatory

Rental Agreement Cover Sheet



24/7 Roadside Assistance:
1-800-526-0798

Rental Agreement #:83968028

Created by: K.TOMKALSKI
Completed by: K.SUDHEER
Entered At: 5675-10
Status: **COMPLETED**

COMMERCIAL LOCAL

Pick Up Date: 03/18/22 03:27 PM
Expected Drop-Off: 03/25/22 03:27 PM
Actual Drop-Off: 03/23/22 12:04 PM
End Bill Date: 03/23/22 12:04 PM
Batch: 5674 on 03/23/22

CUSTOMER INFORMATION

Acct: 3AL1Z100 - 5675
LAKETOWN MOVING, INC.
5656 S PACKARD AVE
STE 22
CUDAHY, WI 53110-2658 USA
Day (414) 366-9188
NRA #: 3372

PICK UP/DROP OFF LOCATION

PENSKE SOUTH MILWAUKEE (5675-10)
6719 S 13TH ST
MILWAUKEE, WI 53221 USA
Voice (414) 768-8600
Fax (414) 768-0200

DRIVER NAME(S): MATTHEW GUNDERSON

TRAVEL SCOPE: Interstate

This lessor cooperates with all Federal, State, and local law enforcement officials nationwide to provide the identity of customers who operate this rental CMV

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2016 - 16FT SAG LIGHT VAN
License #: 3171658
License State: IN
License Exp: 06/30/2022
Owning Location: 5675-10
Vehicle Year: 2021

Max. Payload: 5,373 lbs.
Height: 10 ft.6 in.

Vehicle Make: ISUZU TRUCK

Rented With Damage: NO
Returned With Damage: NO
Mileage Out: 9,281
Mileage In: 9,187
Unleaded Fuel Out: FULL
Unleaded Fuel In: 3/8
VIN: 54DC4W1D9MS201732

Customer shall be responsible for all tolls incurred in the operation of the Vehicle, whether or not the provided transponder is used.

NO HAZARDOUS MATERIAL BEING TRANSPORTED

OPTIONAL PROTECTION PLANS

Limited Damage Waiver/LDW \$1000 Responsibility	*ACCEPTED*
Rates: \$1,213.33/Month \$280.00/Week	\$40.00/Day
Limited Damage Waiver/LDW \$2,000 Responsibility	*DECLINED*
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Rates: \$758.33/Month \$175.00/Week	\$25.00/Day
Supplemental Liability	*DECLINED*

THIS CONTRACT OFFERS, FOR ADDITIONAL CHARGE OPTIONAL VEHICLE PROTECTION TO COVER YOUR FINANCIAL RESPONSIBILITY FOR DAMAGE OR LOSS TO THE RENTAL VEHICLE. THE PURCHASE OF OPTIONAL VEHICLE PROTECTION IS OPTIONAL AND MAY BE DECLINED. YOU ARE ADVISED TO CAREFULLY CONSIDER WHETHER TO PURCHASE THE PROTECTION IF YOU HAVE A RENTAL VEHICLE COLLISION COVERAGE PROVIDED BY YOUR CREDIT CARD OR AUTOMOBILE INSURANCE POLICY. BEFORE DECIDING WHETHER TO PURCHASE OPTIONAL VEHICLE PROTECTION, YOU MAY WISH TO DETERMINE WHETHER YOUR CREDIT CARD OR VEHICLE INSURANCE AFFORDS YOU COVERAGE FOR DAMAGE TO THE RENTAL VEHICLE AND THE AMOUNT OF DEDUCTIBLE UNDER SUCH COVERAGE.

Rental Agreement Cover Sheet



24/7 Roadside Assistance:
1-800-526-0798

Rental Agreement #:84028507

COMMERCIAL LOCAL

Created by:	K.SUDHEER	Pick Up Date:	03/23/22 01:50 PM
Completed by:	K.TOMKALSKI	Expected Drop-Off:	03/30/22 01:50 PM
Entered At:	5675-10	Actual Drop-Off:	03/30/22 01:50 PM
Status:	REWRITTEN	End Bill Date	03/30/22 01:50 PM
Customer Name:	LAKETOWN MOVING, INC.	Batch:	5681 on 03/30/22
Created On:	03/23/22 06:35 PM	Changed On:	03/30/22 02:38 PM

BILLING INFORMATION

Invoice #: PO #: Matt Gunderson-Cudah Billing Cycle: Weekly
 Bill Start Date:03/23/22 01:50 PM Next Billing: 03/30/22

Remit To: PENSKE TRUCK LEASING CO.,L.P. - PO BOX 802577 CHICAGO, IL 60680-2577 USA

REWRITE INFORMATION

Original: 84028507 (1) Original Date Out: 03/23/22 01:50 PM
 Original Expected Return: 03/30/22 Previous: Current: 84028507 (1)

CHARGES

Type	Quantity	Unit of Meas	Rate	Charge
Unit #:347181	1	Week	\$375.00	\$375.00
Mileage Out: 54,491 In: 55,141	650	Miles	\$0.1900	\$123.50
Ldw \$1000 Responsibility	1	Week	\$280.00	\$280.00
Liability Accident Insurance	1	Week	\$175.00	\$175.00
<u>SUBTOTAL:</u>				\$953.50

TAXES

WI SALES TAX \$27.42
TOTAL DUE: **\$980.92**

PAYMENTS AND REFUNDS

Pay Type	Trans	Date	Card #	Approval Code	
VI	PYMT	03/30/2022	xxxxxxxxxxxx6494	313283 on 03/23/2022	(\$980.92)
<u>PAYMENT:</u>					(\$980.92)
<u>NET DUE:</u>					\$0.00

Penske respects your privacy. Penske collects contact, driver's license, and payment information from Customers at time of rental, and shares that information with service providers as needed to facilitate the rental process, perform watch list checks, and process payments. You may have a right to request copies or deletion of the personal information we collect about you under certain local privacy laws. For details on how Penske and its trusted partners manage your personal information, provide you with choices regarding your personal information, and a statement of your privacy rights, see our full Privacy Policy at www.gopenske.com/privacy. You may also contact us at privacy@penske.com or (844) 967-0109.

Customer acknowledges that Customer has read, or been given an opportunity to read, the Rental Agreement, including this Cover Sheet, the General Terms and Conditions, as well as any attachments hereto and agrees to be fully bound by its terms. Before deciding whether to purchase the optional limited damage waiver, you may wish to determine whether your own automobile insurance already affords you coverage for damage to the rental vehicle. To the extent the Customer had purchased Limited Damage Waiver coverage, Customer acknowledges reading, understanding, and agreeing with the disclosures, exclusions, and terms and conditions applicable to Limited Damage Waiver as set forth in Attachment D to the Rental Agreement.

By: _____
 Customer/Authorized Signatory

Rental Agreement Cover Sheet



24/7 Roadside Assistance:
1-800-526-0798

Rental Agreement #:84028507

Created by: K.SUDHEER
Completed by: K.TOMKALSKI
Entered At: 5675-10
Status: REWRITTEN

COMMERCIAL LOCAL

Pick Up Date: 03/23/22 01:50 PM
Expected Drop-Off: 03/30/22 01:50 PM
Actual Drop-Off: 03/30/22 01:50 PM
End Bill Date: 03/30/22 01:50 PM
Batch: 5681 on 03/30/22

CUSTOMER INFORMATION

Acct: 3AL1Z100 - 5675
LAKETOWN MOVING, INC.
5656 S PACKARD AVE
STE 22
CUDAHY, WI 53110-2658 USA
Day (414) 366-9188
NRA #: 3372

PICK UP/DROP OFF LOCATION

PENSKE SOUTH MILWAUKEE (5675-10)
6719 S 13TH ST
MILWAUKEE, WI 53221 USA
Voice (414) 768-8600
Fax (414) 768-0200

DRIVER NAME(S): MATTHEW GUNDERSON

TRAVEL SCOPE: Interstate

This lessor cooperates with all Federal, State, and local law enforcement officials nationwide to provide the identity of customers who operate this rental CMV

UNIT INFORMATION

Unit #:347181
2016 - 16FT SAG LIGHT VAN
License #: 2884580
License State: IN
License Exp: 06/30/2022
Owning Location: 5673-10
Vehicle Year: 2019

Max. Payload: 3,727 lbs.
Height: 11 ft.6 in.

Vehicle Make: ISUZU TRUCK

Rented With Damage: NO
Returned With Damage: NO
Mileage Out: 54,491
Mileage In: 55,141
Unleaded Fuel Out: FULL
Unleaded Fuel In: FULL
VIN: 54DC4W1B2KS802525

Customer shall be responsible for all tolls incurred in the operation of the Vehicle, whether or not the provided transponder is used.

NO HAZARDOUS MATERIAL BEING TRANSPORTED

OPTIONAL PROTECTION PLANS

Limited Damage Waiver/LDW \$1000 Responsibility	*ACCEPTED*
Rates: \$1,213.33/Month \$280.00/Week	\$40.00/Day
Limited Damage Waiver/LDW \$2,000 Responsibility	*DECLINED*
Limited Damage Waiver/LDW \$5000 Responsibility	*DECLINED*
Liability Coverage/LIABILITY ACCIDENT INSURANCE	*PENSKE PROVIDES*
Rates: \$758.33/Month \$175.00/Week	\$25.00/Day
Supplemental Liability	*DECLINED*

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OFFICE OF THE CITY CLERK
Milwaukee, Wisconsin

INSTRUCTIONS FOR FILING A CLAIM AGAINST THE CITY OF MILWAUKEE

To file a claim against the City a claimant must comply with Section 893.80(1), Wis. Stats., a copy of which is printed at the bottom of this instruction sheet. Generally the statute requires the claimant to submit to the City Clerk:

1. A document stating the circumstances of the claim which must be signed by the claimant, or his/her agent or attorney. This document should be filed within 120 days of the event.
2. A document stating the address of the claimant and a statement of the relief sought. If money damages are sought, a specific sum must be stated.

(The above information may be combined in a single document.)

The following information should also be submitted to allow the City to promptly act on your claim:

1. Proof of the amount of the claim by means of either itemized receipts or two itemized estimates.
2. A phone number where the claimant can be reached during business hours as well as the claimant's e-mail address, if any.
3. As detailed a description of the incident as possible, including the date, time and place.

All information should be submitted to:

City Clerk
ATTN: CLAIMS
200 E. Wells St., Room 205
Milwaukee, WI 53202-3567

ADDITIONAL INFORMATION

Before you can file a lawsuit against the City of Milwaukee for reimbursement, State law requires that you first follow the claim procedures established by the City Clerk.

Filing a claim against the City does not automatically guarantee reimbursement from the City. However, the City examines each claim on an individual basis in determining if reimbursement is legally required.

In order to obtain reimbursement for a claim against the City, you must prove that the City or its employees acted unlawfully or negligently.

Only the City Attorney or the Common Council and the Mayor can authorize payment of a claim against the City. Any other representations made by City employees are not legally binding on the City.

893.80 Claims against governmental bodies or officers, agents or employees; notice of injury; limitation of damages and suits. (1) Except as provided in subs. (1g), (1m), (1p) and (8), no action may be brought or maintained against any volunteer fire company organized under ch. 213, political corporation, governmental subdivision or agency thereof nor against any officer, official, agent or employee of the corporation, subdivision or agency for acts done in their official capacity or in the course of their agency or employment upon a claim or cause of action unless:

(a) Within 120 days after the happening of the event giving rise to the claim, written notice of the circumstances of the claim signed by the party, agent or attorney is served on the volunteer fire company, political corporation, governmental subdivision or agency and on the officer, official, agent or employee under s. 801.11. Failure to give the requisite notice shall not bar action on the claim if the fire company, corporation, subdivision or agency had actual notice of the claim and the claimant shows to the satisfaction of the court that the delay or failure to give the requisite notice has not been prejudicial to the defendant fire company, corporation, subdivision or agency or to the defendant officer, official, agent or employee; and

(b) A claim containing the address of the claimant and an itemized statement of the relief sought is presented to the appropriate clerk or person who performs the duties of a clerk or secretary for the defendant fire company, corporation, subdivision or agency and the claim is disallowed.